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5-2801

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	hws		03-14-01
O.I.P.E. CLASSIFIER		59	3311
FORMALITY REVIEW	Kd	551703	05/29/01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original 91 1736 0203	
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Claim	Date
Final Original 9114 173027 020303	
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Claim	Date
Final Original 14 3023 0303	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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